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Bib Data Sheet

CONFIRMATION NO. 4305

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|--|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/535,530   | <b>FILING OR 371(c) DATE</b><br>05/18/2005<br><b>RULE</b>   | <b>CLASS</b><br>324           | <b>GROUP ART UNIT</b><br>2859   | <b>ATTORNEY DOCKET NO.</b><br>PHUS020449US                        |
| <b>APPLICANTS</b><br>Shmaryu M Shvartsman, Highland Hts, OH;<br>Michael A Morich, Mentor, OH;<br>Gordon D DeMeester, Wickliffe, OH;            |   |                               |   |   |
| <b>** CONTINUING DATA *****</b> L.M.A.<br>This application is a 371 of PCT/IB03/04802 10/29/2003 which claims benefit of 60/427,969 11/20/2002 |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b> NONE<br>L.M.A.  |   |                               |   |   |
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged   | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <i>[Signature]</i> Initials <i>L.M.A.</i> | <b>STATE OR COUNTRY</b><br>OH | <b>SHEETS DRAWING</b><br>27   | <b>TOTAL CLAIMS</b><br>28<br>20<br><b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>38107  |   |                               |   |   |
| <b>TITLE</b><br>Self-shielded gradient field coil for magnetic resonance imaging   |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>1500   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:   |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |